

New , Renewal No. _____

**DWELLING APPLICATION SECURITY MUTUAL
INSURANCE COMPANY**

2417 North Triphammer Road
P.O. Box 4620
Ithaca, New York 14852 - 4620

Named Insured and P.O. Address (Number, Street, Town or City, County, State and Zip Code)

Policy Period: From _____ To _____

Bound: Yes , No
Prepaid , DPP
Basic Form: FL-_____
12:01 a.m. Standard Time

The Described Location covered by this policy is located at the above address, unless otherwise stated below:
Location: _____

Bldg	Prot.	Const.	No. of Families	Description of Building				Use	
1									
2									
3									
Coverage	Bldg	A Residence	B Related Private Structures	C Personal Property	D Add'l Living Expense and Loss of Rents	L Liability	M Medical Payments/ Person	M Medical Payments/ Occurrence	
Limit of Liability	1 2 3								
Residence Replacement Cost Provision									
		Replacement Cost Applies Attach R/C Estimator	Replacement Cost Does Not Apply (Actual Cash Value)			Bldg 1	Bldg 2	Bldg 3	
						Fire E.C. Vand.			
						Basic Premium	\$	\$	

- Age of the roof _____ furnace _____ hot water heater _____ circuit breaker box _____
- Are there any fuses? Yes No
- Is there any galvanized plumbing? Yes No

Feet from Fire Hydrant _____ Miles from Fire Department _____ Fire District _____
Tenant Occupancy _____ Premium Table _____ Number of Apartments _____ Deductible \$ _____

	Endorsements	Premium		
		Bldg 1	Bldg 2	Bldg 3
Subject to following forms and endorsements				

Total Prepaid Premium \$ _____ Total Annual Premium \$ _____

Mortgagee _____

**Please Complete Reverse Side.
Insured's Signature Required.**

DIRECT BILL INFORMATION

NEW ESCROW ACCT- BILL MORTGAGEE SECOND YEAR YES

Payer if other than Insured: _____

Yes - pay by EFT, signed form required

Down Payment plus Fees
Must Accompany Application

Underwriting Information:

A. Previous Carrier _____ Policy No. _____

B. Has any carrier cancelled or declined risk within the last 3 years _____, explain _____

C. Any losses in past 3 years _____, explain _____

D. Occupancy: Seasonal Vacant Unoccupied Builder's Risk Rented Mobile Home

Mobile Home Description: Year, Make, Model, Serial Number _____

On Continuous Masonry Foundation Yes No

Builder's Risk: Anticipated date of completion and occupancy _____

E. Tenant's Name _____

If occupied by students, refer to Security Mutual - Albany

IF APPLICABLE:

F. Auxiliary Heat No Yes (Attach Questionnaire) Outdoor Wood Boiler No Yes (Attach Questionnaire)

G. Trampoline used/stored on premises No Yes

H. Animals or Pets on premises No Yes (Attach Questionnaire) _____

I. Swimming Pool No Yes Above Ground In Ground Fenced No Yes Locking gate No Yes

Diving Board No Yes **DO NOT BIND IF IN GROUND POOL IS NOT ENCLOSED WITH 3' FENCE & LOCKED GATE**

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material hereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation. **THE INFORMATION REQUESTED ON THIS APPLICATION IS MATERIAL TO SECURITY MUTUAL INSURANCE COMPANY IN ITS DECISION WHETHER TO ISSUE A POLICY OF INSURANCE. READ OVER THE APPLICATION CAREFULLY BEFORE SIGNING IT. By signing this application you confirm (1) that all information supplied, to the best of your knowledge, is true and (2) you have received a copy of Security Mutual's Privacy Notice.**

Insured's Signature Required.

Agent's Signature _____

Insured's Signature _____

Agency Name & Location _____



Established 1887

SECURITY MUTUAL INSURANCE COMPANY Privacy Protection Policy

At Security Mutual, providing for your security is our highest concern. We have been protecting policyowners since 1887, and that includes protecting the privacy and confidentiality of our customers' personal information. Therefore, we are pleased to publish Security Mutual's Privacy Notice, which describes how Security Mutual, its subsidiary, Security Mutual Brokers Services, and association, New York Mutual Underwriters, handle the information we receive about you.

Information Collection

- ◆ We collect and use information about you in order to provide you with insurance and other services.
- ◆ We obtain most of the information from you, primarily from the application you complete when you apply for our products or services.
- ◆ **Transaction Information:** This is information about your transactions with us, our affiliates, or others. It includes your insurance coverage selections and premiums, payment and claims history, and information necessary for billing and payment. It may also include additional information used to adjust, investigate, and settle insurance claims, such as witness statements and police reports. Transaction information may be disclosed as described below.
- ◆ **Consumer Report Information:** This is information we receive from a consumer reporting agency, and is used to confirm or supplement application information. It includes motor vehicle reports and/or claims history reports. We will disclose consumer report information only as necessary to quote or service your insurance policy and as permitted or required by law. To underwrite your insurance and provide an accurate insurance quote, consumer report information may be shared with our affiliated insurance underwriting association. By obtaining a quote or applying for insurance with us, you consent to our sharing of this information with our affiliated insurance underwriting company.

Information Protection

- ◆ To guard your personal information, we maintain physical, electronic and procedural safeguards that comply with state regulations. We have also appointed a corporate privacy officer to monitor compliance with the Company's privacy policy.
- ◆ All employees are required to protect the confidentiality of our customers' personal information, and they may not access that information unless there is a legitimate reason for doing so, such as responding to a customer request.

Information Disclosure

- ◆ We will not sell your personal information.
- ◆ We will not disclose your personal information except as necessary for conducting business or where permitted by law. For example, we may disclose your personal information to your agent, our employees or our service providers so they can service your business or respond to your questions or requests. We require the recipients of such information to protect the information and use it only for the purpose provided.

Future Notification

Each year, we will provide you with a summary of our privacy policy.

For More Information

If you have any questions about Security Mutual's privacy policy, please contact us or write to our privacy officer at Security Mutual Insurance Company, Post Office Box 4620, Ithaca, New York 14852-4620.